Bankers Life and Casualty Company

GR-N194

This policy form is for Nursing Home and Residential Care Facility Only. This is a Partnership type policy and is classified as Tax Qualified.

Maximum Policy Benefit Amounts				Elimination Periods				
✓ 1 Yr. ✓ 5 Yrs. ✓ Important C 2920 is equivalent	✓ 2 Yrs. ✓ 6 Yrs. ompany Notes:	✓ 3 Yrs.☐ 7 Yrs.	✓ 4 Yrs. ✓ Lifetime	✓ 0 days☐ 20 days✓ 30 days	 ✓ 60 days ✓ 90 days ☐ 100 days	TYPE ☐ Calendar Day ☑ Service Day		
2020 to equivalent	to o years			Inflation Protection				
				✓ 5% Compou ✓ 5% Simple	_	ed Purchase Option		
Nursing Hon	ne Daily Bene	fit Amounts		✓ 5% Simple ✓ Important Company Notes Simple inflation is limited to issue ages 70-89 The Maximum Daily Benefit Amount and the Maximum Benefit Amount per claim episode				
	n to \$300 maxim d in increments c □ per week			are increased each	a the Maximum Beriell An o policy anniversary by the laims paid. Premiums rem	selected inflation option		
\square Not Availabl	le							
☐ Important C	ompany Notes:			Residential (Care Facility Daily	Benefit Amounts		
,				Represents the Benefit Amount 100% 70%	percentage of the N .	0%		

Waiver of Premium

Policy premiums, including any attached riders, are waitved after the elimination period, if any, is satisfied.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elim	ination Period.	90 Day Elimination Period.	
3 year maximum policy benefit			3 year maximum policy benefit		Lifetime benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	Not Available	\$777	Not Available	\$708	Not Available	\$1,147
55	Not Available	\$999	Not Available	\$910	Not Available	\$1,456
60	Not Available	\$1,332	Not Available	\$1,213	Not Available	\$1,930
65	Not Available	\$1,845	Not Available	\$1,681	Not Available	\$2,664
70	Not Available	\$2,698	Not Available	\$2,458	Not Available	\$3,894
75	Not Available	\$4,047	Not Available	\$3,687	Not Available	\$5,725
80	Not Available	\$6,161	Not Available	\$5,614	Not Available	\$0

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

General Electric Capital Assurance Company

7012C

This policy form is for Nursing Home and Residential Care Facility Only. This is a Partnership type policy and is classified as Tax Qualified.

Maximum Policy Benefit Amounts				Elimination Periods				
✓ 1 Yr. ☐ 5 Yrs. ☐ Important C	✓ 2 Yrs. ✓ 6 Yrs. company Notes:	✓ 3 Yrs. ☐ 7 Yrs.	✓ 4 Yrs. ✓ Lifetime	□ 0 days□ 20 days☑ 30 days	☐ 60 days☑ 90 days☐ 100 days	TYPE ☐ Calendar Day ☐ Service Day		
				Inflation Pro	tection			
				✓ 5% Compou ✓ 5% Simple	_	eed Purchase Option		
Nursing Hon	ne Daily Bene	fit Amounts		Simple 5%, Comp				
	n to \$250 maxim d in increments o ☐ per week							
☐ Not Availab	le							
☐ Important C	ompany Notes:			Residential (Care Facility Da	ily Benefit Amounts		
·	. ,			Represents the Benefit Amount 100% 70%	· _	Nursing Home Daily 80%		

Waiver of Premium

Waiver of premium applies once the elimination period has been satisfied.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elim	ination Period.	90 Day Elimination Period.	
3 year maximum policy benefit			3 year maximum policy benefit		Lifetime benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	Not Available	\$630	Not Available	\$460	Not Available	\$790
55	Not Available	\$790	Not Available	\$580	Not Available	\$1,040
60	Not Available	\$1,190	Not Available	\$910	Not Available	\$1,640
65	Not Available	\$1,920	Not Available	\$1,530	Not Available	\$2,810
70	Not Available	\$2,920	Not Available	\$2,250	Not Available	\$4,160
75	Not Available	\$4,240	Not Available	\$3,290	Not Available	\$6,070
80	Not Available	\$6,180	Not Available	\$4,800	Not Available	\$8,790

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

New York Life Insurance Company

21157(898)

This policy form is for Nursing Home and Residential Care Facility Only. This is a Partnership type policy and is classified as Tax Qualified.

Maximum Policy Benefit Amounts				Elimination Periods				
•	✓ 2 Yrs. ☐ 6 Yrs. Company Notes: s also available as a	✓ 3 Yrs. ☐ 7 Yrs.	✓ 4 Yrs. ✓ Lifetime	□ 0 days□ 20 days☑ 30 days	☐ 60 days☑ 90 days☐ 100 days	TYPE ☐ Calendar Day ✓ Service Day		
A hair-year plan k	s also avallable as a	downgrade option	•	Inflation Protection				
				✓ 5% Compou ✓ 5% Simple		ed Purchase Option Company Notes		
Nursing Hor	ne Daily Bene	efit Amounts		The Simple 5% Inflation Option is only available to Insureds issued at age 70 and above. Contact company for more details.				
	m to \$300 maxim d in increments o ☐ per week			age 10 and above.	. Contact company for me	ne details.		
☐ Not Availab	le							
☐ Important C	Company Notes:			Residential (Care Facility Daily	y Benefit Amounts		
	,			Represents the Benefit Amount 100% 70%	e percentage of the N t.	30% ☐ 75%		

Waiver of Premium

Premiums are waived as soon as benefits are paid under the Nursing Home or Home Care benefit (after the waiting period has been satisfied). This requirement must be satisfied once for each period of care.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elim	ination Period.	90 Day Elimination Period.	
3 year maximum policy benefit			3 year maximum policy benefit		Lifetime benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	Not Available	\$676	Not Available	\$568	Not Available	\$874
55	Not Available	\$938	Not Available	\$789	Not Available	\$1,209
60	Not Available	\$1,206	Not Available	\$1,013	Not Available	\$1,543
65	Not Available	\$1,640	Not Available	\$1,378	Not Available	\$2,083
70	Not Available	\$2,312	Not Available	\$1,943	Not Available	\$2,927
75	Not Available	\$3,430	Not Available	\$2,882	Not Available	\$4,332
80	Not Available	\$4,858	Not Available	\$4,082	Not Available	\$6,062

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.